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FORM D

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MAY 22 2008

Washington,

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	_				
OMB APPROVAL					
OMB Number: 3235-007					
Expires:	April	30,2008			
Expires: April 30,2008 Estimated average burden					
hours per response 16.00					

SEC USE ONLY						
Prefix		Serial				
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Name of Offering (check if this is a	an amendment and name has changed, and indicate change.)		
Series C Convertible Preferred Stoc	k Financing		
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE	
Type of Filing:	Amendment	PROCESSED	
	A. BASIC IDENTIFICATION DATA	MAY 0 0	
1. Enter the information requested abou	rt the issuer	MAY 3 0 2008	
Name of Issuer (check if this is an a	mendment and name has changed, and indicate change.)	THOMSON REUTERS	
Lead Horse Technologies, Inc.		THOMSON REUTERS	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)	
711 Southwind Drive, Junction City,	(785) 238-5666		
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)	
Brief Description of Business			
Biomedical informatics-based produ	cts and services		
Type of Business Organization			
corporation	limited partnership, already formed other (p	please COO 4 O 444	
business trust	limited partnership, to be formed	08048111	
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organizat	Month Year or Organization: 014 06 Actual Estimation: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated e: DE	
GENERAL INSTRUCTIONS			
Federal:			

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Armstrong, John M., Ph.D Business or Residence Address (Number and Street, City, State, Zip Code) 711 Southwind Drive, Junction City, Kansas 66441 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Leibnitz, Ramona R., Ph.D Business or Residence Address (Number and Street, City, State, Zip Code) 711 Southwind Drive, Junction City, Kansas 66441 Check Box(es) that Apply: Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Holiday, Allan D., Jr., M.D. Business or Residence Address (Number and Street, City, State, Zip Code) 115 North Evergreen Avenue, Manhattan, Kansas 66502 Check Box(es) that Apply: Executive Officer General and/or Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Tracy, Tage C. Business or Residence Address (Number and Street, City, State, Zip Code) 14119 Roaring Camp Road, Poway, California 92064 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Majerus, John Business or Residence Address (Number and Street, City, State, Zip Code) 711 Southwind Drive, Junction City, Kansas 66441 Check Box(es) that Apply: ☐ Promoter General and/or ☐ Director Managing Partner Full Name (Last name first, if individual) Spirit of '76 Inc. Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 1876, Junction City, Kansas 66441 Executive Officer General and/or Check Box(es) that Apply: Beneficial Owner Promoter Director Managing Partner Full Name (Last name first, if individual) Peloquin, Steven Business or Residence Address (Number and Street, City, State, Zip Code) 3683 Eagle Ridge, Manhattan, Kansas 66502

				B. 1	NFORMAT	ION ABOU	T OFFERI	NG				
1 II 4h			L . ! !	d d	11 4			. AL: - 65:	:0		Yes	No .
1. Has the	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									×		
2. What i	s the minim	um investn					_				c 100	00.000,0
2. ", 1141 1	What is the minimum investment that will be accepted from any individual?						Yes	No				
3. Does t	he offering	permit join	t ownershi	p of a sing	le unit?	• • • • • • • • • • • • • • • • • • • •	***************************************	•••••••		••••••	K	
	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.											
		ntar remune sted is an as:										
		ame of the b							ciated pers	ons of such		
Full Name				- miorman	on for that	DIOKEI OI	ucaiei oiii)	/.				
T dir i vallic	(Dast Haile	mst, m mg	1110001)									
Business or	Residence	Address (N	lumber and	i Street, C	ity, State, 2	Cip Code)						
Name of As	sociated B	roker or De	aler									
States in W	hich Persor	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						· · · · · · · · · · · · · · · · · · ·
(Check	"All State	s" or check	individual	States)				***************************************	••••••		☐ AI	l States
AL	AK	ĀZ	AR	CA	[CO]	CT	DE	DC	FL	GA	HI	ID
TL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	[TN]	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name (Last name first, if individual)												
Business o	Business or Residence Address (Number and Street, City, State, Zip Code)											
	Name of Associated Broker or Dealer											
Name of As	sociated Bi	roker or De	aler									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check	"All States	s" or check	individual	States)	•••••	***************************************	***************************************			••••••	□ VI	States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[D]
IL	M	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	NV SD	NH	NJ TV	NM (UT)	NY VT	NC VA	ND WA	OH)	OK W	OR WV	PA
			TN	TX	(TU)	VT	VA	WA	₩V	WI	WY	PR
Full Name (Last name	iirsi, ii indi	ividual)									
Business o	r Residence	Address (ì	Number an	d Street, C	ity, State, 2	Zip Code)						
Name of As	sociated Bi	roker or De	aler					·				
States in W	hich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers					<u>.</u>	
		s" or check						•••••	••••••	•••••	☐ All	States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[D]
IL	NI NI	[A]	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	3	s
	Equity		
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	:	s
	Partnership Interests		
	-		
	Other (Specify)		
		1,000,000.00	\$_1,230,023.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	10	\$ 1,250,025.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		·
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	T	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A	-	2
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		\$
	Legal Fees		\$ 25,000.00
	Accounting Fees		\$
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		s 25,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS						
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$1,865,000.00		
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross				
			Payments to Officers,			
			Directors, & Affiliates	Payments to Others		
	Salaries and fees		\$ 207,000.00	5 45,000.00		
	Purchase of real estate		s	\$		
	Purchase, rental or leasing and installation of mac and equipment	hinery				
	Construction or leasing of plant buildings and faci	ilities				
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	¬\$	□ \$		
	Repayment of indebtedness					
	Working capital					
	Other (specify):		\$			
			\$			
	Column Totals		\$ 226,500.00	\$ 1,638,500.0		
	Total Payments Listed (column totals added)					
Γ		D. FEDERAL SIGNATURE				
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commis	sion, upon writter			
Iss	er (Print or Type)	Signatura	Date			
Le	ad Horse Technologies, Inc.		May 20, 2008			
Na	ne of Signer (Print or Type)	Title of Signet (Print or Type)				
Гад	e C. Tracy	Chief Financial Officer				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)